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CONFIRMATION NO. 8020

SERIAL NUMBER 10/666,486	FILING OR 371(c) DATE 09/19/2003 RULE	CLASS 435	GROUP ART UNIT 1631	ATTORNEY DOCKET NO. 1784/53661-AA						
APPLICANTS Stewart Shuman, New York, NY; JoAnn Sekiguchi, Belmont, MA; John Comiskey, Carlsbad, CA; Joseph Fernandez, Carlsbad, CA; James Hoeffler, Carlsbad, CA; Robert Marcil, Carlsbad, CA;										
** CONTINUING DATA ***** This application is a CON of 09/096,927 06/12/1998 PAT 6,653,106 which claims benefit of 60/049,405 06/12/1997										
** FOREIGN APPLICATIONS *****										
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/16/2003										
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR COUNTRY NY	SHEETS DRAWING 13	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 5						
ADDRESS John P. White, Esq. 1185 Avenue of the Americas New York, NY 10036 <i>Please correct customer address to customer number 23432 (See Change of Address)</i>										
TITLE Covalent joining of DNA to RNA by vaccinia topoisomerase and uses thereof <i>before covalent joining and marketing. filed 6/23/2006</i>										
FILING FEE RECEIVED 918	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: <table border="1"> <tr> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees (Filing)</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td> </tr> <tr> <td><input type="checkbox"/> 1.18 Fees (Issue)</td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> </tr> <tr> <td><input type="checkbox"/> Credit</td> </tr> </table>				<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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